

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

TEMPORARY

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Number:

Hours per Response

Expires: October 31, 2008 Estimated Average Burden

4.00

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						
[						

Name of Offering ([] check if this is an amendment and name	ne has	chan	iged	and inc	dicat	e change.)		
CONSTANTINE METAL RESOURCES LTD.	- Iss	uanc	e of	200,000	0 sha	res at US\$0.08 <sup>(1</sup>	per Share	
Filing Under (Check box(es) that apply): [] Rule 504 []								
Type of Filing: [X] New Filing [] Amendment								
A. BASIC II	DENT	IFIC	ATI	ON DA	TA	·····		
1. Enter the information requested about the issuer								
Name of Issuer ([] check if this is an amendment and name	has ch	ange	d, a	nd indic	ate c	hange.)		
CONSTANTINE METAL RESOURCES LTD.								
Address of Executive Offices (Number and Street, City, State, Zip	Code)			7	Геlер	hone Number (lı	+ (84 (), 29 () (8 () 28 () 6 () 8 () () () () () () () () () () ()	
Suite 1500 – 800 West Pender Street,				(	(604)	629-2348	08063973	
Vancouver, British Columbia V6C 2V6							00000370	
Address of Principal Business Operations (Number and Street, City	, State,	Zip (	Code	) (if 1	Геlер	hone Number (Incl	uding Area Code)	
different from Executive Offices)								
(same as above)				(	(sam	e as above	OFCCFD.	
Brief Description of Business							CESSED	
junior natural resource - mining exploration						B		
Type of Business Organization						NU	/ 1 2 2008	
[ ] limited partnership, alre	ady for	med		[]	other	(please specify):	•••	
[] business trust [] limited partnership, to b	e forme	ed					ON REUTERS	
	Montl	h		Year	.			
Actual or Estimated Date of Incorporation or Organization:	0	3	2	0 0	6	[x] Actual	[ ] Estimated	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S.	S. Posta	l Serv	vice	abbrevia	tion f	or CN		
State: CN for Canada; FN for other foreign jurisdiction)						CIT		
CENEDAL INSTRUCTIONS								

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

(1) U.S. dollar equivalent based on the noon buying rate in Canada on October 30, 2008, as certified by the Bank of Canada for customs purposes, of US\$1.00 = CDN\$1.2221.

2. Enter the information requested for the following:
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity</li> </ul>
securities of the issuer;
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General/Managing Partner
Full Name (Last name first, if individual)
MACVEIGH, J. GARFIELD
Business or Residence Address (Number and Street, City, State, Zip Code)
Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6
Suite 1500 – 800 West Felider Street, Valicouver, British Columbia Voc 2V0
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
DARWIN GREEN
Business or Residence Address (Number and Street, City, State, Zip Code)
Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
ARIS MORFOPOULOS
Business or Residence Address (Number and Street, City, State, Zip Code)
Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [X] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
DAVID W. ADAMSON
Business or Residence Address (Number and Street, City, State, Zip Code)
Business or Residence Address (Number and Street, City, State, Zip Code) Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6
Business or Residence Address (Number and Street, City, State, Zip Code)  Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6  Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General/Managing Partner
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Business or Residence Address (Number and Street, City, State, Zip Code)  Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6  Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General/Managing Partner Full Name (Last name first, if individual)
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Business or Residence Address (Number and Street, City, State, Zip Code)  Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6  Check Box(es) that Apply: [   Promoter [   Beneficial Owner [ ] Executive Officer [ X   Director [ ] General/Managing Partner  Full Name (Last name first, if individual)  K. WAYNE LIVINGSTONE  Business or Residence Address (Number and Street, City, State, Zip Code)  Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6  Check Box(es) that Apply: [   Promoter [ ] Beneficial Owner [ ] Executive Officer [X] Director [ ] General/Managing Partner  Full Name (Last name first, if individual)  BRIAN C. IRWIN  Business or Residence Address (Number and Street, City, State, Zip Code)  Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6  Check Box(es) that Apply: [   Promoter [ ] Beneficial Owner [ ] Executive Officer [X] Director [ ] General/Managing Partner  Full Name (Last name first, if individual)  TARA M. CHRISTIE  Business or Residence Address (Number and Street, City, State, Zip Code)  Suite 1500 – 800 West Pender Street, Vancouver, British Columbia V6C 2V6  Check Box(es) that Apply: [ ] Promoter [ X] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General/Managing Partner  Full Name (Last name first, if individual)
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A. BASIC IDENTIFICATION DATA

						ATIOŅ AI						
	issuer sold, o				Aı	iswer also i	n Appendi:	x, Column	2, if filing	under ULC	Yes DE. []	No [ X ] \$N/A
											Yes	No
	offering per											X ] ission or simi
remuneration	on for solici broker or de	tation of p aler registe	ourchasers i	n connecti e SEC and	on with sa or with a	ales of secu state or stat	rities in th tes, list the	e offering. name of th	If a persone broker o	n to be list r dealer. If	ed is an asso	ociated person ve (5) persons
	e associated (Last name)			ker or deal	er, you ma	y set forth t	he informa	tion for the	it broker or	dealer onl	у.	
N/A	(Cast name)	inst, ii iid	ividual)									
	Residence	Address (N	lumber and	Street, Ci	y, State, Z	ip Code)						
N/A	ssociated Br	okar or Da	nler									
Name of As	SSOCIALEG DI	oker of De	aici									
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit I	ourchasers (	Check "Al	I States" or	check indi	ividual Stat	tes) ~ All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[11]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	{OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	(PR)
Full Name	(Last name	first, if indi	ividual)									
Business or	Residence	Address (N	Jumber and	Street Cit	v State 7	in Code)				· · · · · · · · · · · · · · · · · · ·		
	residence	. 1441035 (1	various and	5000, 01	.,, o.u.e, 2	p 00 <b>00</b> )						
Name of As	ssociated Br	oker or De	aler									
		Listed Ha	s Solicited	or Intends						ividual Stat	tes) ~ All Sta	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name i	first, if indi	ividual)									
Business or	Residence	Address (N	Number and	Street, Cit	y, State, Z	ip Code)						
Name of As	ssociated Br	oker or De	aler			<del> </del>		<del></del>				
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit I	ourchasers (	Check "Al	I States" or	check indi	ividual Stat	tes) ~ All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[НО]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business or	Residence	Address (N	Number and	Street, Ci	ty, State, Z	ip Code)				<u>.</u>	<u></u>	
	ssociated Br											
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(AL)	{AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI] IMSI	[ID]
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA] of this she			[ 44 1 ]	[1,17]

(Use blank sheet, or copy and use additional copies of this sheet as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns			
	below the amounts of the securities offered for exchange and already exchanged.  Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$0	•	\$0
	Equity	\$16,365(1)	•	\$16,365 <sup>(1)</sup>
	[X] Common [ ] Preferred	410,000	-	
	Convertible Securities (including warrants)	\$0		\$0
	Partnership Interests	\$0	•	\$0
	Other (Specify):	\$0	-	\$0
	Total	\$0		\$0
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on			Aggregate Dollar Amount
	the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Of Purchases
	Accredited Investors	2		\$16,365 <sup>(1)</sup>
	Non-accredited Investors	0		\$0
	Total (for filings under Rule 504 only)	0		\$0
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering	Type of Security		Dollar Amount Sold
	Rule 505	N/A		\$ N/A
	Regulation A	N/A	-	\$ N/A
	Rule 504	N/A		\$ N/A
	Total	N/A	-	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		[]	\$0
	Printing and Engraving Costs		ij	\$0
	Legal Fees		[X]	\$800
	Accounting Fees		[]	\$0
	Engineering Fees		ij	\$0
	Sales Commissions (specify finders' fees separately)		ij	\$0
	Other Expenses (identify): state filing fee		[X]	\$300
	Total	***************************************	[X]	\$1,100
	- 2	************		,

4.	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a.  This difference is the "adjusted gross proceeds to the issuer."				\$15,265
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.  Salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)  Repayment of indebtedness  Working capital (including general exploration purposes)  Other (specify):  Column Totals  Total Payments Listed (column totals added)  U.S. dollar equivalent based on the noon buying rate in Canada on Canada for customs purposes, of US\$1.00 = CDN\$1.2221.		Payments to Officers, Directors, & Affiliates \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		Payments to Others  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$15,265 \$0 \$15,265
	D. FEDERAL SIGNATURE				
Rı Co	ne issuer has duly caused this notice to be signed by the undersigned duly a rule 505, the following signature constitutes an undertaking by the issuer to ommission, upon written request of its staff, the information furnished b rsuant to paragraph (b)(2) of Rule 502.	furnis	sh to the U.S. S	Securitie	s and Exchange

Issuer (Print or Type)	Signature	Date
CONSTANTINE METAL RESOURCES LTD.	1. Mys	November <u>4</u> , 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
ARIS MORFOPOULOS	Chief Financial Officer	

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations.
(See 18 U.S.C. 1001.)

E.	S.	ГΔ	TF	C1	GN	Δ	Тī	ID	F
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1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions	Yes	No
	of such rule?	[ ]	[X]
	See Appendix, Column 5, for state response		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly signed person.

Issuer (Print or Type)	Signature	Date				
CONSTANTINE METAL RESOURCES LTD.	Si MG2	November <u>4</u> , 2008				
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
ARIS MORFOPOULOS	Chief Financial Officer					

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

	2	3		4				ς		
				5						
						Disqualification under State ULOE				
		Type of security								
1	d to sell to	and aggregate					(if yes, attach			
	accredited	offering price		Type of inv	estor and		explanation of			
invest	tors in State	offered in state		Amount purch	ases in State		waiver granted)			
(Part	B-Item 1)	(Part C-Item 1)		(Part C-I	tem 2)		(Part E-Item 1)			
			-	•	Number of	1		<u> </u>		
		Share of	Number of		Non-	ļ		ì		
		Common Stock	Accredited		Accredited	ľ		•		
State Yes	No		Investors	Amount	Investors	Amount	Yes	No		
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AK		<u>                                </u>					<del> </del>	ł		
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CT										
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NE	+				-			ļ <u>-</u> -		
NV	X	200,000 Shares	2	\$16,365 <sup>(1)</sup>	0	0		X		
14	^		2	310,303	"	"	ļ	^		
		at an aggregate								
		price of \$16,365 <sup>(1)</sup>						ļ		
		\$16,365**								
NH						ļ	ļ			
NJ					1					
NM										
NY										
NC	1				· · · · · · · · · · · · · · · · · · ·		l	1		
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UT		<del> </del> -				<del></del>	ļ	<del></del>		
VT	l	<u> </u>		<u> </u>	L	L	<u> </u>	<u> </u>		

## APPENDIX

1	2		3	4			5		
i			Tuna af assumity						ification
	Intend to call to		Type of security						ite ULOE
	Intend to sell to		and aggregate	77			(if yes, attach		
	non-accredited		offering price	Type of investor and			explanation of		
	investors in State (Part B-Item 1)		offered in state	Amount purchases in State (Part C-Item 2)			waiver granted)		
			(Part C-Item 1)				(Part E-Item 1)		
1						Number of			
i		İ	Share of	Number of		Non-		ļ	
	1		Common Stock	Accredited		Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
VA						_			
WA									
WW	l				1				
WI									
WY									
PR									

<sup>(1)</sup> U.S. dollar equivalent based on the noon buying rate in Canada on October 30, 2008, as certified by the Bank of Canada for customs purposes, of US\$1.00 = CDN\$1.2221.

